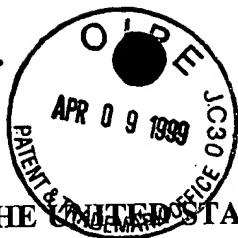


PATENT



ATTORNEY DOCKET NO. CSHL.005.00US

Receipt

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Roberto Malinow *et al*

) Examiner: NYA

Serial No.: 09/193,221

) Art Unit: 1614

Filed: November 16, 1998

) TRANSMITTAL LETTER

Title: **Diagnostic methods for drug screening  
for Alzheimer's disease**

)  
)

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Application Processing Division - Customer Correction Branch  
Assistant Commissioner for Patents  
Washington, D.C. 20231

APR 12 1999

MATRIX CUSTOMER  
SERVICE CENTER

Sir:

Transmitted herewith are the following documents in the above-identified application.

- ☐ Small entity status of this Application under 37 CFR 1.9 and 1.27 has been established by a Verified Declaration previously submitted.
- ☐ A Verified Declaration of Small Entity Status Under 37 CFR 1.9 and 1.27 is enclosed.
- ☒ Request for Correction of Filing Receipt

Also enclosed:

- ☒ Return postcard (postage prepaid).

CERTIFICATE OF FIRST CLASS MAILING

I hereby certify that this paper or fee is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231 on 4/5/99.

Signature: [Signature]

Printed Name: Janine Sperandeo



The fees have been calculated as shown below

<u>Claims</u>	<u>Remain after Amend</u>	<u>Highest No. Prev. Paid</u>	<u>Pres. Extra</u>	<u>Small Entity</u>		<u>Large Entity</u>	
				<u>Rate</u>	<u>Fee</u>	<u>Rate</u>	<u>Fee</u>
Total:				x \$9	= \$	x \$18	= \$
Indep:				x \$39	= \$	x \$78	= \$

If Multiple dependent Claims

are used for the first time in this application, add \$130 (small entity) \$260 (large entity).

Total Additional Claims Fee:

<u>Extension of Time Fee</u>		<u>Small Entity</u>	<u>Large Entity</u>
<input type="checkbox"/>	One Month	\$ 55	\$ 110
<input type="checkbox"/>	Two Months	\$190	\$ 380
<input type="checkbox"/>	Three Months	\$435	\$ 870
<input type="checkbox"/>	Four Months	\$680	\$1360
<input type="checkbox"/>	Five Months	\$925	\$1850

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Extension of Time Fee

Other fees (list individually):

Total Other Fees:

TOTAL FEES: \$

- ☐ A check including the amount of the above-indicated TOTAL FEES is attached.
- ☐ Please charge Deposit Account No. 18-0020 in the amount of \$\_\_\_\_\_.
- ☐ A check in the amount of \$25.00 is attached.
- ☒ No fee is required.
- ☒ Conditional Petition for Extension of Time: An extension of time is requested in the present and/or the above-referenced parent application to provide for timely filing if an extension of time is still required after all papers filed with this transmittal have been considered.

[X] The Commissioner is hereby authorized to charge any underpayment of the following fees associated with this communication, including any necessary fees for extension of time, or credit any overpayment to Deposit Account No. 18-0020.

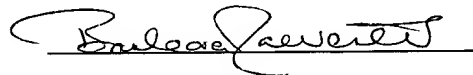
[X] Any filing fees under 37 CFR 1.16 including fees for the presentation of extra claims.

[X] Any parent application processing fees under 37 CFR 1.17.

[X] A duplicate copy of this sheet is attached for accounting purposes.

Respectfully submitted,

Date: April 2, 1999

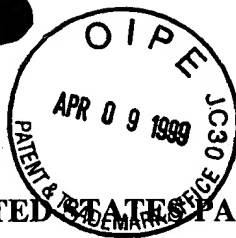


Barbara Rae-Venter, Ph.D.  
Reg. No. 32,750

Rae-Venter Law Group, P.C.  
P. O. Box 60039  
Palo Alto, CA 94306  
Telephone: (650) 328-4400  
Facsimile: (650) 328-4477

BRV/jas  
Enclosures

PATENT



ATTORNEY DOCKET NO. CSHL.005.00US

#6

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Roberto Malinow *et al*

) Examiner: Not yet assigned

Serial No.: 09/193,221

) Art Unit: 1614

Filed: November 16, 1998

) **REQUEST FOR CORRECTION OF**  
) **FILING RECEIPT**

For: **Diagnostic methods for drug screening for**  
**Alzheimer's disease**

)  
)  
)

**Application Processing Division - Customer Correction Branch**

Assistant Commissioner For Patents

Washington, D.C. 20231

Dear Sir:

In accordance with 37 C.F.R. §§1.53(a), (b) and 1.54(b), please issue a second corrected filing receipt for this application. The first name of the second inventor is misspelled. A copy of the incorrect receipt is attached for reference. The corrected filing receipt should read:

**Applicant(s):** Roberto Malinow, Cold Spring Harbor, NY; **Shahid** Zaman, Cold Spring Harbor, NY; Sangram S. Sisodia, Chicago, IL; David R. Borchelt, Baltimore, MD; Michael K. Lee, Baltimore MD.

This error occurred in the Patent and Trademark Office. Therefore, no fee is believed due.

**CERTIFICATE OF FIRST CLASS MAILING**

I hereby certify that this paper or fee is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231 on 4/5/99.

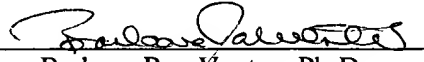
Signature: 

Printed Name: Janina Sperandio

However, if a fee is due, the Commissioner is hereby authorized to charge any underpayment of the fees associated with this communication, including any necessary fees for extension of time, or credit any overpayment to our Deposit Account (*see* Transmittal).

Respectfully submitted,

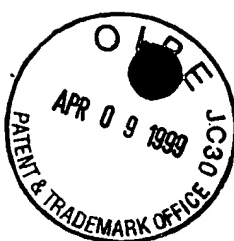
Dated: April 2, 1999

  
Barbara Rae-Venter, Ph.D.  
Reg. No. 32,750

Rae-Venter Law Group, P.C.  
P. O. Box 60039  
Palo Alto, CA 94306  
United States of America  
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Facsimile: (650) 328-4477

BRV/jas

FILING RECEIPT  
CORRECTED



UNITED STATES DEPARTMENT OF COMMERCE  
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/193,221	11/16/98	1614	\$484.00	A-67162/BIR	0	12	5

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FEB 16 1999

BARBARA RAE-VENTER

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Application Processing Division's Customer Correction Branch within 10 days of receipt. Please provide a copy of the Filing Receipt with the changes noted thereon.

Applicant(s)

ROBERTO MALINOW, COLD SPRING HARBOR, NY; SHAHID ZAMAN, COLD SPRING HARBOR, NY; SANGRAM S. SISODIA, CHICAGO, IL; DAVID R. BORCHELT, BALTIMORE, MD; MICHAEL K. LEE, BALTIMORE, MD.

FOREIGN FILING LICENSE GRANTED 12/04/98

\* SMALL ENTITY \*

TITLE

DIAGNOSTIC METHODS FOR DRUG SCREENING FOR ALZHEIMER'S DISEASE

PRELIMINARY CLASS: 514

DATA ENTRY BY: MASON, JAMES

TEAM: 02 DATE: 02/05/99